

Return to Clinic Guidelines

Please see recommendations below for scheduling follow up appointments for patients based on Past Medical History:

PMH	Well controlled/Stable
Pre-Diabetes	12 months
Diabetes	6 months*
Hypertension	12 months*
Hyperlipidemia	12 months
CKD3	6 months
CKD4	3 months (+ refer to Nephrology)
CKD5	Ensure F/u with Nephrology
ESRD on HD	6-12 months
Depression/Anxiety	6-12 months
Hypothyroidism	6-12 months
Cirrhosis	6 months
CAD	6 months
CHF	6 months
Stroke (h/o)	6 months
Dementia	6 months if in Memory Clinic
Asthma/COPD	6 months
Cancer (followed by Oncology)	6-12 months
Chronic Pain, on Opioids	3-6 months
Substance Use Disorder	3 months (+ referral to care team)
HIV Pre-exposure Prophylaxis	1 month, then 3-6 months
General Healthcare Maintenance	12 months
Follow up after urgent concern (i.e UTI)	PRN
Follow up after labs/imaging/referral	PRN (if urgent, set reminder to ensure task complete)

* For *uncontrolled* HTN or DM, consider referral to available resources for help with control

- Consider phone follow up for tasks that do not require face to face evaluation (i.e. Depression, DM, Hypothyroidism)
- Do not schedule an appointment solely to ensure patient completes their labs/imaging or to ensure patient is plugged into a sub-specialty (consider placing Reminder to self instead)